



# STATEMENT OF PARTNERSHIP FILED EFFECTIVE AUTHORITY

(Instructions on back of application)

2006 JUN -2 AM 8:50

SECRETARY OF STATE  
STATE OF IDAHO

The undersigned partnership hereby files a statement of partnership authority, and submits the following information to the Secretary of State pursuant to Idaho Code § 53-3-303.

- The name of the partnership is: Escobedo Enterprises
- The street address of its chief executive office is: 50 Zimmer Lane, Horseshoe Bend, ID 83629
- The street address of one (1) office in Idaho: 50 Zimmer Lane, Horseshoe Bend, ID 83629
- The names and mailing addresses of all partners (attached sheets may be added):

Name	Address
<u>Louis A. Escobedo, Jr.</u>	<u>50 Zimmer Lane, Horseshoe Bend, ID 83629</u>
<u>Christine A. Escobedo</u>	<u>50 Zimmer Lane, Horseshoe Bend, ID 83629</u>
<u> </u>	<u> </u>

OR the name and address of the registered agent in Idaho is:

 

- The names of the partners authorized to execute an instrument transferring real property held in the name of the partnership:

<u>Louis A. Escobedo, Jr.</u>	<u> </u>	<u> </u>
<u>Christine A. Escobedo</u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>

- Signature of at least 2 partners:

1) *Louis A. Escobedo*

Typed Name Louis A. Escobedo

2) *Christine A. Escobedo*

Typed Name Christine A. Escobedo

3)  

Typed Name  

Secretary of State use only

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Revised 01/2001

Web Form

IDAHO SECRETARY OF STATE  
06/02/2006 05:00  
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